PTO/SB/21 (08-03)

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TRANSMITTAL		Application Numb	er	09/783,577			
FORM		Filing Date		02/12/2001			
(to be used for all correspondence after	initial filing)	First Named Inver	ntor	Victor I. Chomenky			
		Art Unit		3739			
		Examiner Name		Shay, David M.			
Total Number of Pages in This Submission 5		Attorney Docket N	lumber	009.1009C1 (P775CON2)			
ENCLOSURES (check all that apply)							
Fee Transmittal Form	Drawing	18(8)		After Allowance Communication to Technology Center (TC)			
Fee Attached .	Licensir	g-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply	X Petition		X	_ ''			
After Final	7 1 1	to Convert to a nat Application		Proprietary Information			
Affidavits/declaration(s)	Powero	f Attorney, Revocation of Correspondence	on 🗆	Status Letter			
Extension of Time Request	 	Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request	for Refund						
Information Disclosure Statement	CD, Nur	nber of CD(s)					
Certified Copy of Priority Document(s)				·			
Response to Missing Parts/ Incomplete Application	Remarks						
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNAT	URE OF APPLIC	ANT, ATTORNEY,	OR AGE	NT			
Firm or Individual name Vincent B. Ingrassia, Reg. No. 25,732							
Signature							
Date (March 25, 2004							
CERTIFICATE OF TRANSMISSION/MAILING							
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Type or printed name Vincent B. Ingge	ssia						
Signature			Date	March 25, 2004			

application. Confidentially is governed by 37 CFR 1.5. This tole and 37 CFR 1.14. SEND FEES OR COMPLETED FORMS TO: Mail Stop ____. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

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PTO/SB/17 (10-03)
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CEE TO A NOMITTAL			Complete if Known						
FEE TRANSMITTAL		Application Number 09/78				3,577			
for FY 2004		Filing Date 02/12			02/12	/2001			
Effective 10/01/2003. Patent fees are subject to annual revision.			First Named Inventor Victor			I. Chomenky			
				David M.					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit 3739								
TOTAL AMOUNT OF PAYMENT (\$) 1,660.00	Attorney Docket No. 009.1			009C1 (P775CON2))					
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
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Number	1051		2051		Surcharge - la				
Deposit Account Ingrassia Fisher & Lorenz	1052	50	2052	25	Surcharge - la cover sheet	te provisiona	l filing fee or	<u> </u>	
Name The Director is suthorized to: (check all that apply)	1053		1053			-English specification			
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Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting pu Examiner active		BIR after		
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1. BASIC FILING FEE	1252	420	2252	210	Extension for	reply within s	second month	-	
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1005 160 2005 80 Provisional filing fee		1,510	1451		•	_	pribeasong azu		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1502	1,330	2501	665	Utility issue fe	e (or relssue))		
Extra Claims below Fee Paid Total Claims X		480	2502		Design issue f			<u> </u>	
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Multiple Dependent	1807	50	1807		Processing fee				
Large Entity Small Entity	1806	180	1808		•		Disclosure Strnt		
Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	46	Recording each	h patent assir	onment per		
1202 18 2202 9 Claims in excess of 20	1809	770	2809		property (times Filing a submis	number of p	oroperties)	 	
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1203 280 2203 145 Multiple dependent claim, if not paid 1204 88 2204 43 ** Reissue independent claims	1810	770	2610		For each addit examined (37)				
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SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above		ced by Basic Filing Fee Pald SUBTOTAL (3) (\$) 1,660.00				0.00			
SUBMITTED BY. (Complete (d epolicable))									
Name (Print/Print) (Vincent P. Ingrassia Registration No. 25.732 Telephone									
Signature (Attorney/Acent)						Date March 25, 2004			

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TO:	FROM: (2016)						
Shay, David M., Examiner	Vincent B. Ingrassia, Atty, Reg. No. 25,732						
COMPANY: USPTO	DATE: MARCH 25, 2004						
FAX NUMBER: 703-872-9306	TOTAL NO. OF PAGES INCLUDING COVER:						
703-308-4357	SENDER'S REFERENCE NUMBER: 009.1009C1 (P775CON2)						
Response Pursuant To 37 C.F.R.§1.111	RECIPIENTS REFURENCE NUMBER: 09/783,577						

TIRGENT

FOR REVIEW

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NOTES/COMMENTS:

EXAMINING GROUP ART UNIT 3739

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